

FAMILY AND COMMUNITY SERVICES POLICY MEMORANDUM

FACSPM 20-01.1
Disaster Plan Update

Effective Immediately

TO: All Child and Family Services Staff

FROM: Miren Unsworth



DATE: March 31, 2020

SUBJECT: COVID-19 Staff Protocol for Client Contact

In FACS Policy Memo 20-01 (attached), specific protocols regarding client contacts by were outlined due to the COVID-19 crisis. This guidance will remain in effect until April 30, 2020 and will be reevaluated at that time.

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POLICY MEMORANDUM

FACSPM 20-01
Disaster Plan Update

Effective Immediately

TO: All Child and Family Services Staff

FROM: Miren Unsworth

DATE: March 20, 2020

SUBJECT: COVID-19 Staff Protocol for Client Contact

Over the past several days, we have seen our state and federal governments take unprecedented measures to mitigate the spread of the novel coronavirus (COVID-19). As critical members of the Child and Family Services workforce, your health and safety are of the utmost importance. As you are aware, information regarding COVID-19 is changing rapidly and we are working closely with our state and federal partners as well as local Health Districts to obtain the most current information. As we obtain more information, we will continue to provide you with guidance to complete the important work you do on behalf of children, youth, and families.

This memo addresses specific protocols regarding in-person FACS client contacts and will be effective immediately and will remain in effect until April 3, 2020. At that time, it will be reconsidered as the health crisis requires. This memo will not address every potential scenario that may arise as the response to COVID-19 evolves. All policy guidelines are to be followed with the exception of monthly in-person contacts with children placed in foster homes, birth parents, and foster parents. The use of Skype, FaceTime or other video conferencing is approved during face to face contact in order to ensure the continuity of service to our children and families. The use of telephone to complete visits must be approved by a supervisor. As case specific questions related to COVID-19 arise, please direct them to your direct supervisor, chief, or program manager. They will enlist the support of Central Office staff as needed to determine how to support you in your work.

During all in person contacts with clients or other stakeholders, whenever possible, please follow the CDC's guidance regarding social distancing of six (6) feet, frequent handwashing, and/or the use of hand sanitizing gel.

Guidance related to all Child Protection Safety Assessments:

- Ensure that all intakes accepted for assignment are reviewed prior to assigning for information regarding the child or family status related to COVID-19.
- When contacting the referent, determine if they have information they can provide regarding the child or families status related to COVID-19.

- Upon arrival at the home, the worker should complete the screening questions for all household members at the door prior to entering the home:
 - Have you, or any member of your family, been exposed to someone who has a confirmed case of COVID-19?
 - Have you traveled to areas highly affected by COVID-19?
 - Are you or anyone in your household being tested for COVID-19?
 - Do you have any of the following symptoms?
 - Fever
 - Dry cough
 - Shortness of breath

If the answer to any of these questions is “yes,” do not enter the home. Consult with your supervisor on alternative assessment plans.

Guidance related to all Voluntary and Case Management cases:

- The social worker will conduct monthly visits with all children placed in foster homes through video such as FaceTime, Skype, or other video conferencing. The use of video conferencing for face to face visits is required for monthly visits beginning immediately and until April 3, 2020. Telephone visits may only be used upon supervisor approval. The waiver of the in person, face to face requirement must be well documented in the iCare narrative for monthly contacts. Since iCare does not have the option of “video” when identifying the method of the contact, please select “telephone” as the method and at the beginning of the narrative identify that it was by video (Skype/FaceTime/other video conferencing). When documenting any contact or visit which occurs via video or telephone, documentation needs to include the reason why face to face contact was not possible and why video or telephone is the most appropriate alternative. Video example: Consistent with an Idaho state emergency declaration, COVID-19 precautions were utilized for client visits through video conferencing based on current directives. Phone example: Phone contact was utilized rather than video conferencing because equipment was not available and was approved by a supervisor.
- For cases where children or youth are on an extended home visit or protective supervision with parents, or there is a voluntary case with a safety plan in place, the worker must continue to assess the safety of the children via face-to-face contacts, utilizing the guidance above related to questions to ask prior to conducting the visit and social distancing steps.
- For all cases with a formal or informal safety plan, the worker will contact the safety monitor on a weekly basis, at a minimum, to confirm their continued ability to serve as a monitor.
- Staff will conduct visits with parents/caretakers by video conferencing as available or by phone to discuss the wellbeing of children in their care, ongoing case planning and to assess for the needs of the parents/caretakers.
- The social worker will ensure that age appropriate children, parents, relative/kinship providers, and safety monitors have their and their supervisors contact information as well as the number for Centralized Intake.

Guidance related to Foster Care and Adoptions:

- Unless there are identified concerns within a residential setting, foster or pre-adoptive home, all monthly visits with children and youth in foster care will be conducted through video conferencing. Please refer to the attached **Guidance for Social Worker Video and Phone Contacts and Visits in Foster Care Cases**. If there are concerns that cannot be addressed through video conferencing, please staff with your supervisor for additional direction.
- Staff will conduct all visits with caretakers via video or phone to assess for ongoing need of the provider and the child. Please refer to the attached **Guidance for Social Worker Video and Phone Contacts and Visits in Foster Care Cases**.
- During the video or phone visit, staff will verify the caretaker has received information regarding the change for in person visits due to COVID-19. If not, staff will forward the information by email or mail as needed.
- All supervised parent/child visits will be conducted utilizing video (i.e. FaceTime, Skype, or other video conferencing). This change is effective immediately and will continue until April 3, 2020, at which time it will be re-evaluated
- All unsupervised parent/child visits or visits with relatives will be negotiated between the department, foster family, and biological parents. This negotiation must include the questions identified above to screen all participants for COVID-19. If any of the answers to those questions are yes for any participant, then the unsupervised visit must be completed via video conferencing. Prior to the negotiated unsupervised visit, the assigned social worker must staff the decision with a supervisor. If the participants cannot negotiate the unsupervised visit, or if the department assesses that any of the participants cannot follow the emergency declaration requirement for social distancing a supervisor or chief should be included to make final decisions regarding the unsupervised visit. If video conferencing is unavailable, the social worker must obtain supervisor approval for a phone visit between the parent and child. All visits that are not conducted face to face must be well documented in iCare under the monthly visit narrative. Since iCare does not have the option of “video” when identifying the method of the contact, please select “telephone” as the method and at the beginning of the narrative identify that it was by video (Skype/FaceTime/other video conferencing). Please follow the **Guidance for Social Worker Video and Phone Contacts and Visits in Foster Care Cases**.
- The social worker will ensure that age appropriate children, parents, relative/kinship providers, and safety monitors have the worker’s and their supervisor’s contact information as well as the number for Centralized Intake.

Guidance related to the licensing of Foster Homes:

- Final decisions regarding the ability to provide pre-service, orientation, and Foster Parent Training and Support via Zoom are being considered. Until that decision is made, all training not already in progress has been postponed. PRIDE rounds already started are testing the Zoom capability and other technology options in order to complete the round.
- Unless there is a current concern regarding the foster family’s compliance with licensing rules and standards, all re-licensing visits should be rescheduled for after

April 3, 2020. If licensing concerns exist, contact the foster family prior to the visit to screen for possible COVID-19 exposure. If the answer to any of the questions is yes, staff the case specific situation with your supervisor to determine how to respond. IDAPA rule allows for a delay in relicensing as long as the department has not taken action on the foster care license.

- All initial licensing visits for prospective applicants should be rescheduled until after April 3, 2020. The only exception is for new Expedited Placements through the Code X process. The assigned licensing worker should contact the prospective family to screen for possible COVID-19 exposure with the questions above. If any of the answers are yes, staff the situation with your supervisor to determine the next steps based on the case specific need for immediate assessment.
- All new licensing complaints should be reviewed with your supervisor to determine if they must be addressed face to face or if video contact will be sufficient to appropriately address the reported concern. If the decision is made that the complaint must be addressed in person, call the family first to screen for possible COVID-19 exposure. If any of the answers are yes, staff again with your supervisor to determine next steps to limit exposure to the virus.
- Licensing workers should assure that foster families have the worker's and their supervisor's contact information. Efforts must be made to update phone and email contact information in the Resource Parent profile screen to aid in future communications related to this or future events.